

2013-2015
Renewal

**THE LICENSEE IDENTIFIED BELOW IS AUTHORIZED TO CONDUCT
BUSINESS AS INDICATED BY THE LICENSE TYPE.**

LICENSE TYPE: Money Transmitters Part II

LICENSE NAME: CHECKFREEPAY CORPORATION

DBA NAME:

**ORIGINAL DATE OF
LICENSE:** 11/29/2007

LICENSE NUMBER: FT20800022

**LICENSE EXPIRATION
DATE:** 4/30/2015

LICENSE MAIN ADDRESS:

STREET: 15 STERLING DR

CITY: WALLINGFORD

STATE: CT

ZIP CODE: 06492